Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10649248

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS		12					RATE	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			12 minus 20=		* 10			X\$ 9=		OR	X\$18=	1
INDEPENDENT CLAIMS			ے minus 3 =		* 0			X42=	_	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, entei	r "0" in c	olumn 2		TOTAL	375	OR	TOTAL	
CLAIMS AS AMENDED - PART II										J •···	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	٠
	Independent	* NTATION OF MI	Minus	***	F CL AIM	= .		X42=		OR	X84=	
<u></u>	THOTTHESE		OCTIFEE DEF	CINDEIN	CLANVI	. [_]	١. ا	+140=		OR	+280=	
							L	TOTAL		OR	TOTAL	
		(0-11)		(0.1	۵۱	(0) (0)	,	ADDIT. FEE		10	ADDIT. FEE	<u></u>
_		(Column 1)		(Colur HIGH		(Column 3)	l r		400	1 1		
AMENDMENT B	16.50	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=-		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MU	JEHPLE DEF	ENDENT	CLAIM	<u> </u>	!	+140=		OR	+280=	
							Ĺ	TOTAL			TOTAL	
		(O. I					F	ADDIT. FEE		On	ADDIT. FEE	
_		(Column 1)		(Colur HIGH		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	╽┟	X42=	· ·		X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							746=		OR		· · ·
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+140=		OR	+280=	·
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	her Previously Pai	id For" (Total or	Independ	ant) ic the	highest pumbo	r for	nd in the see	rapriata bas	امم من	umo 1	